

FINANCIAL AFFIDAVITCJA 23
(Rev. 5/98)

IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT, OR OTHER COURT SERVICES WITHOUT PAYMENT OF FEE

IN UNITED STATES
IN THE CASE OF☐ MAGISTRATE ☐ DISTRICT ☐ APPEALS COURT or ☐ OTHER PANEL (Specify below)

FOR

LOCATION NUMBER

VS.

AT

PERSON REPRESENTED (Show your full name)

Jennifer Parao

- 1 ☒ Defendant - Adult
 2 ☐ Defendant - Juvenile
 3 ☐ Appellant
 4 ☐ Probation Violator
 5 ☐ Parole Violator
 6 ☐ Habeas Petitioner
 7 ☐ 2255 Petitioner
 8 ☐ Material Witness
 9 ☐ Other (Specify) _____

DOCKET NUMBERS

Magistrate

District Court

Court of Appeals

CHARGE/OFFENSE (describe if applicable & check box →) ☐ Felony ☐ Misdemeanor

ASSETS

EMPLOYMENTAre you now employed? ☐ Yes ☒ No ☐ Am Self Employed

Name and address of employer: _____

IF YES, how much do you earn per month? \$ _____ IF NO, give month and year of last employment _____
How much did you earn per month? \$ _____If married is your Spouse employed? ☐ Yes ☒ NoIF YES, how much does your Spouse earn per month? \$ _____ If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$ 175 weekly
Nov 2003 End.**OTHER INCOME**Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? ☐ Yes ☒ NoIF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY \$ _____
THE SOURCES _____

RECEIVED

SOURCES

CASHHave you any cash on hand or money in savings or checking account ☐ Yes ☒ No IF YES, state total amount \$ _____**PROPERTY**Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? ☐ Yes ☒ NoIF YES, GIVE THE VALUE AND \$ _____
DESCRIBE IT _____

VALUE

DESCRIPTION

OBLIGATIONS
& DEBTS**DEPENDENTS****MARITAL STATUS**

- ☒ SINGLE
☐ MARRIED
☐ WIDOWED
☐ SEPARATED OR DIVORCED

Total
No. of
Dependents1

List persons you actually support and your relationship to them

Drew Bacham
Weekly visitations**DEBTS & MONTHLY BILLS**

(LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)

APARTMENT OR HOME:

Creditors

Total Debt

Monthly Payt.

Sprint Cell phone\$ 125.00\$ 50.00

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date) _____

SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED)

Jennifer Parao March 24 2004